

FEC
FORM 3REPORT OF RECEIPTS
AND DISBURSEMENTS

For An Authorized Committee

SECRETARY OF THE SENATE
Office Use Only1. NAME OF
COMMITTEE (in full)

TYPE OR PRINT ▼

Example: If typing, type
over the lines.

15 OCT 15 PM 4:34

Hagan for U.S. Senate, Inc.

ADDRESS (number and street)
▼

PO Box 29103

Check if different
than previously
reported. (ACC)

Greensboro

NC

27429

2. FEC IDENTIFICATION NUMBER ▼

CITY ▲

STATE ▲

ZIP CODE ▲

STATE ▼ DISTRICT

C C00457622

3. IS THIS
REPORT☒ NEW
(N)

OR

☐ AMENDED
(A)

NC

00

4. TYPE OF REPORT (Choose One)

(a) Quarterly Reports:

April 15 Quarterly Report (Q1)

July 15 Quarterly Report (Q2)

☒ October 15 Quarterly Report (Q3)

January 31 Year-End Report (YE)

Termination Report (TER)

(b) 12-Day PRE-Election Report for the:



Primary (12P)



General (12G)

Runoff (12R)



Convention (12C)



Special (12S)

Election on

in the
State of

(c) 30-Day POST-Election Report for the:



General (30G)

Runoff (30R)

Special (30S)

Election on

in the
State of

5. Covering Period

M M
09D D
21Y Y
2015

through

M M
09D D
30Y Y
2015

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer Lili Snyder

Signature of Treasurer

Lili Snyder

Date

M M
09D D
30Y Y
2015

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g.

Office
Use
OnlyFEC FORM 3
(Revised 02/2003)